

SUBJECT: Revolving Fund Deficiency Claim for Reimbursement	NO.: 21-02
REFERENCES: Government Code Section 16400 State Administrative Manual Section 8072	DATE ISSUED: September 14, 2020

PURPOSE: This Audit Memo reminds and informs state departments/agencies of existing instructions for preparing and submitting a revolving fund deficiency claim for reimbursement. Additionally, this Audit Memo includes department/agency reporting requirements and the "Revolving Fund Reimbursements" annual report format.

AUTHORITY: Government Code Section 16400, as amended by Chapter 726, Statutes of 1994, permits agencies to replenish certain revolving fund deficiencies from existing appropriations of their designation. The amendment also transfers claim approval responsibility from the Victim Compensation and Government Claims Board to the Director of the California Department of Finance (Finance). The Director of Finance has delegated this responsibility to the Office of State Audits and Evaluations (OSAE).

REIMBURSEMENT PROCESS:

Refer to State Administrative Manual Section 8072 for further information.

Where to File: Except as noted below, departments/agencies have been delegated authority to approve deficiency claims of less than \$1,000. Send these claims directly to the State Controller's Office (SCO) for reimbursement. Do not split claims to meet the "less than \$1,000" criteria.

For claims \$1,000 or greater, or for a multiple deficiency claim that totals \$2,500 or more, departments/agencies must file a reimbursement claim, Standard Form 27A, with OSAE.

Standard Form 27A: File all reimbursement claims on Standard Form 27A, *Claim for Reimbursement*. Include a copy of both sides of the canceled check(s) that caused the deficiency, and a description and supporting documents of attempted collection activities. Ensure all applicable boxes are selected in the Summary of Shortage section. The Standard Form 27A can be located on the Department of General Services' website at: https://www.documents.dgs.ca.gov/dgs/fmc/pdf/std027A.pdf.

The department/agency's internal audit unit, if one exists, must review all claims prior to submission to OSAE. The claim must be signed by the head of the internal audit unit.

Claim Submittal: Claims can be submitted electronically to <u>OSAEReports@dof.ca.gov</u> or by mail to:

California Department of Finance ORF Reimbursement Office of State Audits and Evaluations 915 L Street, 6th Floor Sacramento, CA 95814

OSAE Claim Review and Audits:

OSAE reviews each submitted claim for inclusion of:

- proper approvals/signatures
- completeness of information for the type of deficiency
- purpose of the original payment
- copy of canceled check(s)
- explanation of unavailable canceled check(s) copy or unresolved claim correction
- explanation indicating what corrective steps have been taken and documents supporting the actions

Additionally, claims will be processed upon confirmation that the required annual report was submitted to OSAE for the prior fiscal year.

Approved Claims: OSAE will return an approved claim to the department/agency with an approval stamp. The department/agency should submit the approved claim to SCO for reimbursement.

Denied Claims: OSAE will return any denied claim to the department/agency with an explanation letter addressing the reason(s) for denial. Denied claims should be filed as equity claims with the Victim Compensation and Government Claims Board. Cash shortages in trust or bank accounts that create deficiencies in established fund balances are considered equity claims.

OSAE may audit/review any claim and its supporting documentation. Further, the frequency and/or nature of claims may result in an audit or review of a department/agency's revolving fund.

ANNUAL REPORTING REQUIREMENTS

Departments/agencies must report annually to OSAE, by September 30, the disposition of all claims for reimbursement of revolving fund deficiencies for the period ending June 30 of the prior fiscal year. OSAE requires this annual report from every department/agency, even if there is no activity. A sample format is attached to this Memo. Ensure department/agency contact information is included.

Submit annual reports to: OSAEReports@dof.ca.gov

Please distribute this Audit Memo to departmental Internal Auditors, Accounting Officers, and others as appropriate. If you have any questions, please contact Becky McAllister, Assistant Chief, OSAE, at (916) 322-2985, Ext. 3136.

/s/ Cheryl L. McCormick

Cheryl L. McCormick, Chief
Office of State Audits and Evaluations
California Department of Finance

Department/Agency Name Revolving Fund Deficiency Claim for Reimbursement As of June 30, 20XX

Department/Agency Contact

Name:

Phone Number: Email Address:

Claim	Claim		Claim		
Schedule	Schedule	Date	Schedule	27A	
Number	Date	Paid	Amount	Amount	Reason for Deficiency

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